

Postgraduate NP and/or PA Training Programs Learning Collaborative

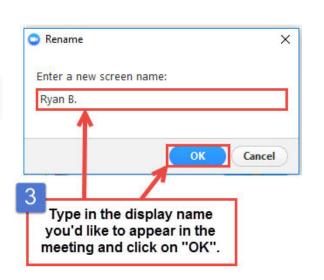
Session One: Tuesday October 8th, 2024



Get the Most Out of Your Zoom Experience

- Please keep yourself on MUTE to avoid background/distracting sounds
- Use the CHAT function or UNMUTE to ask questions or make comments
- Please change your participant name to your full name and organization
 - "Meaghan Angers CHCI"







Session 1 Agenda

- 1:00-1:15 Introduction to CHCI, Collaborative Expectations, & Role of the Coach
- 1:15-1:30 Team Introductions: Part I
- 1:30-1:35 Program Drivers
- 1:35-1:45 Developing Mission and Vision Statement
- 1:45-1:50 Resource Assessment
- 1:50-2:05 Team Introductions: Part II
- 2:05-2:15 Support from Leadership/Board of Directors
- 2:15-2:20 Communication Within Your Organization About the PGR Program
- 2:20-2:25 Basic Overview of Program Structure
- 2:25-2:30 Q/A, Wrap-Up and Evaluation



Learning Collaborative Faculty

Margaret Flinter, APRN, PhD, FAAN

- Co-PI, NTTAP
- CHCl's Senior Vice President/Clinical Director
- Founder of America's first nurse practitioner residency program

Kerry Bamrick, MBA

- Executive Director, Consortium for Advanced Practice Providers
- Coach Mentor

Charise Corsino, MA

- Program Director, CHCI Postgraduate NP Residency Program
- Coach Mentor

Amanda Schiessl, MPP

- Chief of Staff, MWHS
- Co-PI & Project Director, NTTAP

Meaghan Angers

Senior Program Manager, NTTAP

Bianca Flowers

Program Manager, NTTAP



MORE THAN WHAT WE DO. IT'S WHO WE DO IT FOR.





MOSES/WEITZMAN Health System

Always groundbreaking. Always grounded.

Community Health Center, Inc.

A leading Federally Qualified Health Center based in Connecticut.

ConferMED

A national eConsult platform improving patient access to specialty care.

The Consortium for Advanced Practice Providers

A membership, education, advocacy, and accreditation organization for APP postgraduate training.

National Institute for Medical Assistant Advancement

An accredited educational institution that trains medical assistants for a career in team-based care environments.

The Weitzman Institute

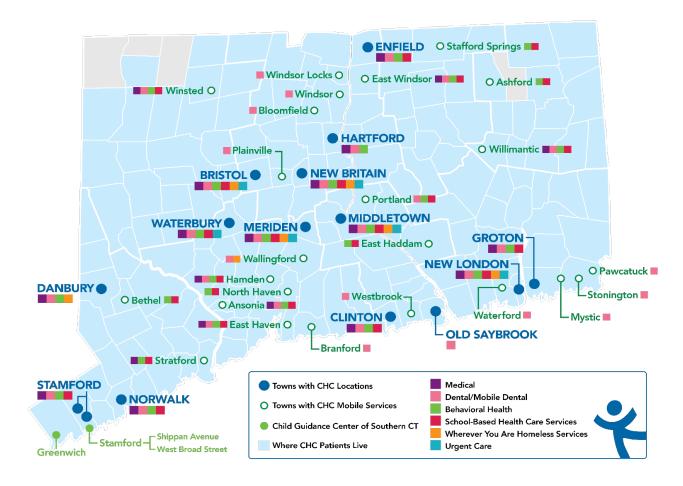
A center for innovative research, education, and policy.

Center for Key Populations

A health program with international reach, focused on the most vulnerable among us.



Locations & Service Sites





THREE FOUNDATIONAL PILLARS					
1	2	3			
Clinical Excellence	Research and Development	Training the Next Generation			

Profile

Founding year: 1972

Annual budget: \$140M

Staff: 1,140

Active Patients: 150,000

SBHCs across CT: 153

Students/year: 14,522

Year	2021	2022	2023
Patients Seen	99,598	102,275	107,225



CHCI NP Residency Program Today

Family NP Residency









Pediatric NP Residency Fiona Hart, PNP

Sarah Mitchell, PNP

Gayelan Tietje-Ulrich, FNP Martha Darnall, AGNP

Hillary Miller, FNP











Psychiatric MH NP Residency





Bar Hass, FNP

Skyla Cedano, FNP

Neha Malrani, FNP

Deniz Yetil, FNP

Toni Morrison, PMHNP

Fran Revels, PMHNP

Meredith Wanik, PMHNP

Country's first program (est. 2007) Operating for 18 years Graduated 167 alumni

Recipient of two competitive HRSA grants for **Advanced Nursing Education**

NP Residency Tracks:

- Family NPs (est. 2007)
- Psych MH NPs (est. 2015)
- Pediatric NPs (est. 2019)
- Adult-Gero NPs (est. 2019) discontinued
- Post-residency Fellowship (est. 2017)



Primary Care, Psychiatric/MH and Specialty Postgraduate Training Programs — Total: 535 Programs Nationally



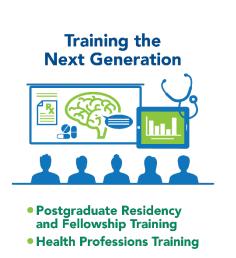


National Training and Technical Assistance Partners (NTTAP) Clinical Workforce Development

Provides free training and technical assistance to health centers across the nation through national webinars, learning collaboratives, activity sessions, trainings, research, publications, etc.

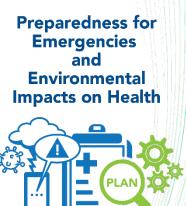
Fundamentals of Comprehensive Care

Advancing Team-Based Care











2024-2025 Cohort				
Alivio Medical Center	Chicago, Illinois			
Arkansas Primary Care Association	North Little Rock, Arkansas			
Blue Ridge Community Health Services, Inc.	Hendersonvlle, North Carolina			
Brockton Neighborhood Health Center, Inc.	Brockton, Massachusetts			
Children's Primary Care Medical Group	San Diego, California			
Esperanza Health Center	Philadelphia, Pennsylvania			
Family Health Centers of San Diego	San Diego, California			
Greater Philadelphia Health Action, Inc.	Philadelphia, Pennsylvania			
Indian Health Service Headquarters	Rockville, Maryland			
Lifecare Family Health and Dental Center	Canton, Ohio			
Marin Community Clinic	Novato, California			
ND Systems Inc.	Fairbanks, Alaska			
Ozark TriCounty Healthcare Consortium dba ACCESS Family Care	Neosho, Missouri			
Tennessee Primary Care Association	Nashville, Tennessee			
Umpqua Community Health Center dba Aviva Health	Roseburg, Oregon			



Learning Collaborative Structure



Welcome to the Postgraduate NP and/or PA Training Programs Learning Collaborative!

The Postgraduate NP/PA Training Programs Learning Collaborative is a 6-month participatory learning experience offered by the National Health Center Training and Technical Assistance Partners (NTTAP) Cooperative Agreement for the Development Area of Clinical Workforce Development, funded by the Health Resources and Services Administration, and hosted by Community Health Center, Inc. (CHCI) in Middletown, CT.

The Collaborative is designed to provide transformational strategies and coaching support to help organizations implement Postgraduate NP/PA Training Programs. The Collaborative will provide a series of videoconference learning sessions with organizations from across the country, ongoing mentoring, technical assistance, and access to web-based tools.



Objectives of the Learning Collaborative

- 1. Build the case for starting a postgraduate residency program in their organizations.
- 2. Identify the clinical and financial resources required to support a postgraduate residency program.
- Identify the operational and administrative activities that support a postgraduate residency program.
- 4. Develop the structure and curriculum for a postgraduate residency program.
- 5. Evaluate postgraduate resident learner outcomes and the impact of the postgraduate residency program.
- 6. Prepare for program accreditation
- 7. Contribute to the learning among participating organizations by engaging in Learning Collaborative activities.



Learning Collaborative Structure

- Six 90-minute Learning Collaborative video conference sessions
- Bi-weekly 60-minute calls between coach mentors and team coach
- Internal team workgroup meetings
- Access resources via the <u>Weitzman</u> Education Platform
- Use <u>Google Drive</u> to share your work

Learning Session Dates			
Learning Session 1	Tuesday October 8 th		
Learning Session 2	Tuesday November 12 th		
Learning Session 3	Tuesday December 10 th		
Learning Session 4	Tuesday January 14 th		
Learning Session 5	Tuesday February 11 th		
	Tuesday March 11 th		



Elements of Success

- Attendance at collaborative learning sessions and engagement in weekly coach/mentor calls
- **Engagement** in work between sessions that included protected time to meet as a team, trust and respect.
- Commitment of trained coaches to improving their skills and helping teams achieve results
- Support of practice leadership for time, resources, spread and sustainability



Coach Mentor and Team Coach Roles

Role of Coach Mentor

- Meet with Team Coaches bi-weekly to discuss progress
- Work directly with Team Coach to identify successes and work through challenges/barriers.
- Be available for individual sessions with Team Coaches for specific team and program development

Role of Team Coach

- Help teams facilitate effective internal meetings
- Participate in bi-weekly Zoom calls with Coach Mentors to discusses progress and challenges
- Help team achieve their aim, complete assignments, and give progress reports



Team Introductions

- Name of your practice, location, size, etc.
- Names and positions of participating team members
- Goals for the learning collaborative

	Order of Team Introductions	
1	Aviva Health	
2	Access Family Care	
3	Alivio Medical Center	
4	Arkansas Primary Care Association	
5	Blue Ridge Community Health Services, Inc.	
6	Brockton Neighborhood Health Center, Inc.	
7	Children's Primary Care Medical Group	

Aviva Health

- Who, what, where
 - Umpqua Community Health Center, dba Aviva Health
 - Our name means "hope" or "springtime" (Hebrew) or "rekindle/renew" (Spanish)
 - An FQHC with a catchment area of Douglas County, Oregon
 - ~ 105,000 in our coverage area, with a little overlap with a sister FQHC
 - Oregon Coast to Crater Lake National Park | DC is roughly the size of Connecticut
 - Payor Mix: 52% Medicaid (OHP) | 20% Medicare | 22% Commercial (Includes TriCare) | 6% Other
- Distinctive capabilities and capacities
 - Ten sites including an SBHC, Dental Lab. Mix of Medical, Dental, and BH
 - Two Mobile Clinics, Douglas County Public Health functions
 - Roseburg Family Medicine Residency (8-8-8 unopposed) | THCGME Grant Recipient
 - Area Health Education Center host (AHECSW)
 - ReConnect Scribes
 - Earn to Learn (E2L) program



More Info & Goals

- Notable academic & clinical partners
 - Mercy Medical Center (CommonSpirit) | Umpqua Community College
 - Western U of Health Sciences | Pacific University | OHSU
 - Oregon State | University of Oregon | Texas A&M
- Explorations/On the Horizon
 - Administrative Internships: OSU | Texas A&M | ACHE/AHA Summer Enrichment Program (SEP), Summer/Fall 2025
 - APP Residency pilot, Fall 2025
 - Dental Residency 2025-26
 - Extended MS3 medical student clinicals, 2025-26
 - Dental Therapist rotation site, Spring 2027 (statewide pilot)
 - Inclusion of additional learner types/students: Pharmacy | PT/OT
 - Residency Faculty Development Fellowship, 2026+
- Intro:
 - KC Bolton: CEO | Dr Jay Richards: COCOMO | AHECSW Director: Christin Rutledge
 - Goals
 - Baseline education of program launch steps | Keep pace to launch program in fall of 2025, with accreditation a follow-on goal



ACCESS Family Care

Locations in SW Missouri, serving 6 counties & around 27,000 people.

7 Medical Clinics and 5 Dental Clinics



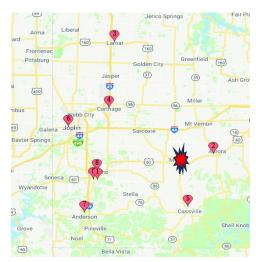






We currently have 310 CAREgivers (employees). Of those CAREgivers we have:

- 17 Behavioral Health Providers
- 14 Dental Hygienists
- 14 Dentists (with 2 more coming on board)
- 14 Nurse Practitioners (with 1 more coming on board)
 - 7 Physicians (with 1 more coming on board)





ACCESS Family Care

Participants:

- Don McBride, CEO
- Carrie Foote, COO
- Hillary Shadwick, CAO
- Dr. John Paulson, CMO
- Sheila Long, CFO
- Chris Van Wey, Project Manager
- Ismael Silva, Grants Manager
- Alicia Russell, Training Manager



















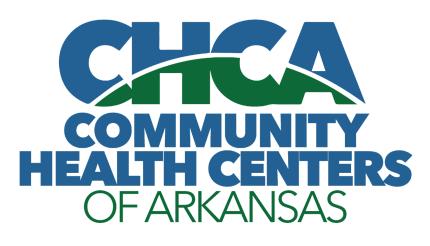
Introduction for NTTAP

- A federally qualified health center serving the south and west sides of Chicago and a nearby suburb
- Seven sites: 3 multi-specialty clinics, 3 embedded within local high schools, one dental site
- Service lines: Adult medicine, pediatrics, OB-GYN/CNMW, psychiatry, dental, behavioral health, pharmacy, dietitian, community health workers, case managers
- In Primary Care there 12 are MD/DOs, 8 FNPs and 2 PAs
- Current affiliations with University of Chicago and Loyola University to train pediatric and adult medical residents, respectively



NTTAP Team Members

- Katherine Tynus, MD, FACP
 - Internal Medicine Primary Care Physician, 28 years experience
 - Former residency program director
- Joanne Zimmerly MSN, FNP-BC, ANCC
 - FNP at Alivio, 23 years experience
 - Clinical Champion of Quality Improvement
- Clarisa Medina-Poeliniz, RN, MSN, CPNP, PhD
 - Pediatric Nurse Practitioner
 - Practices within school-based and primary care clinics
- Jennifer Vargas, MD
 - Family Medicine Physician
 - Medical Director of Alivio Medical Center



Community Centers of Arkansas

The Arkansas Primary Care Association

October 8, 2024

Moses Weitzman Postgraduate Nurse Practitioner (NP) Residency and NP/Physician Assistant (PA) Training Programs Learning Collaborative

Lanita S. White, PharmD, Chief Executive Officer Mia Stark, Chief Operating Officer Miranda Morris, Chief Strategy Officer Sherie Brown, Workforce Development Director



CHCA At a Glance

- In 1985, Community Health Centers of Arkansas (CHCA) was established as a non-profit organization by existing health centers. The goal was to expand access to affordable, quality care in Arkansas and to serve as a unified voice for Community Health Centers (HCs) and the patients they serve.
- CHCA is governed by a Board of Directors, comprised of CEOs from each member HC. There are twelve (12) HC organizations throughout Arkansas. Eleven (11) HC Organizations are members of CHCA.
- For over 40 years, CHCA has successfully served as a conduit for training and technical assistance for Arkansas health centers, establishing new programs, and acquiring funding that supports greater access to comprehensive services for vulnerable, underserved populations.
- CHCA collaborates with local, state and federal partners, organizations, and policy makers to positively influence changes to policies, regulations, and legislation aimed at strengthening the health centers and their patients.



CHCA's Goals for the Learning Collaborative

- Arkansas Health Centers are plagued by workforce shortages, particularly in rural areas.
- Standing up health professional educational training programs is challenging for them,
 yet each of our 12 HC organizations have developed their own partnerships to conduct
 nursing and physician rotations.
- Beside them, the PCA has established preceptor rotations with the largest medical school in Arkansas. Yet, rotations are at the school's and student's discretion.
 Frequently, the health centers in urban areas get few students. Those in rural often do not get any.
- CHCA's CEO is a former Assistant Dean of the University of Arkansas for Medical Sciences.
- CHCA's Chief Strategy Officer has a wealth of education in both health care and has served as faculty at the University of Central Arkansas



CHCA's Goals for the Learning Collaborative

- CHCA, with the support of it's HC CEOs, is establishing a residency program and administering it for the health centers, taking the burden off health centers. Several other health professional educational programs will be developed as well.
- Program planning and development is underway.
- Our goal is to gain insights from the learning collaborative to reaffirm our work and support our success.



FEDERALLY QUALIFIED HEALTH CENTER IN WESTERN NC

- Serving 10 counties, 66 locations, over 50,000 patients in 2023
- 30% uninsured

GOAL

Start an Advanced Practice Nurse Practitioner Residency Program to increase new APP clinical confidence, competency, and provider retention.

TEAM MEMBERS

Heather Whisnant, FNP, Blue Ridge Chimney Rock Medical Director

Other team members: MaryShell Zaffino, MD, Chief Medical Officer at Blue Ridge Health, Sarah Poteat (Blue Ridge Chimney Rock Practice Manager) Daniel Hinderliter, Hannah Parks, FNP

Team will likely grow and expand.

Brockton Neighborhood Health Center

- More than 200,000 visits per year in primary care, OB/gyn, dental, behavioral health and psychiatry, nutrition, vision
- More than 700 staff
- ➤ Located in Brockton, MA,15 miles southeast of Boston
- Provides care for more than 39,000 patients
 - Majority Black/African American (40.3%)-2nd highest in MA
 - Large Cape Verdean, Haitian, Brazilian communities
 - Largest population of Cape Verdean Americans in America





Brockton Neighborhood Health Center Learning collaborative team



Sue Joss, CEO
Joe Panerio-Langer MD, CMO
Sunny Chavan MD, Chief of Adult Medicine
Maria Cancel, LMHC, Director of Social Services
Kandyce Casey, NP, Primary Care NP

Our Goals:

Prepare for implementation our newly funded psychiatric NP residency program

Plan for primary care residency program (funding application pending)

Children's Primary Care Medical Group

- * Formed in 1995, we've grown to be the region's (and one of the nation's) largest pediatric only medical groups
- * We have over 165 board-certified pediatricians, nurse practitioners and physician assistants
- * We practice in 28 practice sites throughout San Diego and Southwest Riverside counties.
- * Our clinics are open daily from 8 AM- 5 PM as well as regional evening (until 8:30 PM) and weekend clinics (Saturday/Sunday 8 AM- noon)
- * We have a long history of teaching and have taught hundreds of Nurse Practitioner, Physician Assistant, and Medical Students, have high school shadowing and volunteer programs and host Pediatric and Family Practice Medical Residents for month long and 3-year continuity clinic rotations.



Our Team:

Patricia Lee, FNP,-C MSN, CPNP Lead Nurse Practitioner CPCMG Rancho Bernardo Office

Pamela Fish, FNP-C, PMHS Behavioral Health Specialist Chula Vista Office

Kenneth Morris MD, FAAP Chief Medical Officer CPCMG Chula Vista Office

Jessica Coullahan, MD, FAAP Director of Education CPCMG Escondido Office

Hilary Bowers MD, FAAP Director of Behavioral and Mental Health CPCMG Poway Office





Program Drivers Building the Case for a Postgraduate NP and/or PA Training Program



Your organization should ask:

Why do we want to start a Postgraduate NP/PA Training Program?



35



CHC's Drivers for Developing the Model of Postgraduate NP Residency Training

- Increase the nation's ability for every person to have an expert primary care provider, but particularly in underserved communities and special populations
- Provide new NPs committed to practice careers as PCPs with an intensive training experience focused on training to clinical complexity and high performance
- Provide a highly structured transition from university to practice that supports the development of confidence, competence, and mastery in the FQHC setting
- Attract new NPs to safety net settings in communities rural and urban, large and small, and prevent attrition through intensive support in first year
- Utilize the postgraduate training year to develop expertise in high volume/high burden condition such: chronic pain, HIV, Hepatitis C, addiction
- Introduce new PCPs to innovations like Project ECHO®, eConsults, team-based care, data driven QI
- Create a nationally replicable, sustainable model of FQHC-based postgraduate training for new NPs



Polling Question

What is your primary reason for starting a Postgraduate NP/PA Training Program?

Recruitment and Retention
Committed to Training
Staff Development
Staff Satisfaction
Patient Access
Unsure



Developing a Mission and Vision Statement



Mission and Vision

- Define your program's mission and vision
- But Why?
 - ✓ Focuses your program's future
 - ✓ Provides your team with a common foundation and focus
 - ✓ Supports in making strategic decisions
 - ✓ Provides a consistent external message to key stakeholders



Mission Statement

- Mission your program's mission statement should define the core purpose of your program. The statement will provide a clear and concise focus of the program which will remain over time even components or activities change.
- **Tip** Be clear and concise, while also communicating the essential components



CHCI's Mission Statement

CHC's Postgraduate Nurse Practitioner Residency Training Program provides new Nurse Practitioners with the depth, breadth, and intensity of training to clinical complexity and high performance primary care in the service delivery setting of a community health center that leads to competence, confidence and mastery as a primary care provider and improved health outcomes for the patients they care for and the health system as a whole.





Vision Statement

- Vision your program's vision statement should define your program's aspiration goals and preferred future. It is a forward thinking statement about the desired change your program will have.
- **Tip** Think about the larger goals you are trying to achieve in starting a program and what it will accomplish looking forward 5 years



CHCI's Vision Statement

CHC's Postgraduate Nurse Practitioner
Residency Training Program aims to train the
next generation of an expert primary care
workforce and to develop future Nurse
Practitioner leaders in Community Health
Centers and other safety net settings that will
contribute to providing and improving the
access to and quality of health care to our
nation's most vulnerable populations.





Communicating Your Mission and Vision

- Mission and Vision Statements should be reflected in your core program documents
- Your team should refer back to your mission and vision often especially for your internal decision making
- Be sure to prominently feature your mission and vision in external communication for the benefit of applicants, stakeholders and interested parties





Strategies for Developing Mission and Vision Statements with your Team

- Each team member can draft their own idea of the mission and vision statement for the program
- Share them with the group
- Discuss which parts you like best from team member's statements or pull out key words that resonate with your team
- Develop a new statement based on what your team members came up with
- Or maybe one of your team members knocked it out of the park and you all agree on that!





Resource Assessment

Physical, Human, Financial, & Organizational Resources



	PROGRAMMATIC RESOURCE ASSESSMENT							
	PHYSICAL	HUMAN						
1.	Have you identified the site will your residents be assigned? ☐ Y ☐ N	Have you identified key program staff (if yes list positions)? ☐ Y ☐ N						
2.	Have you identified a dedicated workspace for the residents? ☐ Y ☐ N	Have you identified potential preceptors (NPs) or supervisors (Post Doc) for the program? ☐ Y ☐ N						
3.	If Y to question 2, is the space integrated as part of a primary care team? Y	Have you identified potential specialty rotations for the program? □ Y □ N						
4.	Do you have available conference space and video technology for weekly educational programming? N	Have you identified potential didactics/seminars presenters for the residents? ☐ Y ☐ N						
	FINANCIAL	ORGANIZATIONAL						
1.	Have you established the terms of employment (salary and benefits)? Y	Have you discussed with the following departments about the launch of your post-graduate residency program?						
2.	Have you developed a program budget? ☐ Y ☐ N	Board of Directors □ Y □ N Leadership – commitment to training program □ Y □ N Human Resources – recruitment, retention, onboarding, credentialing, benefits □ Y □ N IT – hardware, software, EMR, conferencing technology □ Y □ N Finance - resident salaries/benefits, payroll, billing □ Y □ N Operations – scheduling, front desk □ Y □ N Clinical Support staff – support of clinical care for resident patient care experiences □ Y □ N						



Team Introductions

- Name of your practice, location, size, etc.
- Names and positions of participating team members
- Goals for the learning collaborative

	Order of Team Introductions	
1	Esperanza Health Center	
2	Family Health Centers of San Diego	
3	Greater Philadelphia Health Action, Inc.	
4	Indian Health Service Headquarters	
5	Marin Community Clinic	
6	ND Systems Inc.	
7	Tennessee Primary Care Association	

Esperanza Health Center



Christian FQHC serving primarily Latino communities in North Philadelphia across 3 sites with ~34 medical providers

NP Residency Team Members:

NP Residency Director: Steven Wood, FNP

Director of Medical Education: Charlene Chen, MD, DipABLM

Associate Medical Dept. Administrator: Sandra Newhall

Medical Dept. Administrator: Megan Liu

Goals for Collaborative

Esperanza Health Center

- Start a nurse practitioner residency program by September, 2025
- Create functional timeline for development of the NPR
- Develop well-rounded didactic curriculum
- Develop robust evaluation process
- Prepare for accreditation

FAMILY HEALTH CENTERS OF SAN DIEGO

- Large FQHC in San Diego, CA
 - 22 primary care sites plus numerous specialty services*
 - Serving over 200,000 patients per year, of whom 91% are low-income and 29% are uninsured*
- Previously hosted a 6-month transition-to-practice program for new-grad NPs and PAs ("Immersion Program)
- October 2024 transitioning to a 12-month Advanced Practice Provider Residency Program
 - Program modeled off Immersion Program but with enhancements to met accreditation standards; hope to become accredited after first cohort graduates
 - Will have 4 NP residents this cohort.
- Learning Collaborate participants:
 - Program Director: Melanie Swan, DNP
 - FHCSD's Lead Nurse Practitioner Cindy Mangene, NP
 - Goal of collaborating with other new/upcoming programs and gaining ideas for strategies to ensure program is of highest quality possible
 - We are both in clinic Tuesdays we wish we could be there live to meet you all!

Greater Philadelphia Health Action, Inc.

- FQHC in Philadelphia,
 PA
- Medical, Dental, and Behavioral Health
- 12 sites throughout Philadelphia
- Serving >80,000 patients throughout the region



Learning Collaborative Participants



Jacqui Ioli, PhD, CRNP, PPCNP-BC

 Clinical Practice Director, Pediatric Nurse Practitioner



Amanda Gattinella, MSN, CRNP

 Site Clinical Lead (Southeast Health Center), Family Nurse Practitioner

Indian Health Service (IHS)

- Agency within Health and Human Services (HHS): Responsible for providing federal health services to American Indian and Alaska Native people. Twelve Areas each with multiple service units (SU) made up of Federal, Tribal and Urban (I/T/U) sites.
- Starting team members:
 - IHS National Headquarters, Division of Nursing Services Representative-Patricia Sullivan, DNP, APRN, FNP-BC, Advanced Practice Nurse Consultant
 - Loretta Craig, DNP, APRN, FNP-C Supervisory NP (Emergency Department, Chinle SU, Navajo Area)
 - Anna Knight, MS, FNP-C, PHN, NP Healthcare Consultant-Tribal Project Officer (California Area Office)
 - Kari Josefson, DNP, APRN, FNP-BC, Deputy Clinical Director (Red Lake SU, Bemidji Area)
 - Johnna Tunnyhill, LT, MSN, ARNP, FNP-C, Nurse Practitioner (Taos SU, Albuquerque Area)
- **Problem:** Currently, there is a high vacancy rate of permanent providers and minimal advanced practice provider (APP) new graduate hiring because there is no formal program to support new graduates which is needed due to the complexity of care and very rural environment.
- Goal: The goal of the IHS team is exploratory- documenting the requirements for establishing a program in IHS Federal sites taking into consideration the varying landscapes across the agency. Develop a road map that can be modified and utilized across the I/T/U demonstrating the return on investment of an APP new graduate training program.



10/7/2024 54



Marin Community Clinics

Marin County, CA



Our Team



Maria Kristensen, DNP, MPH



Heyman Oo, MD MPH



MC Operations Team Member



Rebekah Harding, MD



Who We Are

- Federally Qualified Health Center (FQHC), founded in 1972 by volunteer physicians
- Comprehensive primary care, oral health, behavioral health, obstetrics/gynecology, and vision services
- Ancillary services: onsite labs, radiology, pharmacy and some sub-specialties (podiatry, cardiology, dermatology, acupuncture, nutrition, chiropractic, etc.)
- Current clinics include; San Rafael Campus Clinic, Downtown San Rafael, Fourth Street Dental Clinic, San Rafael Kerner Clinic, West San Rafael Clinic, Greenbrae Clinic, Larkspur Clinic, North Novato Clinic, South Novato Clinic





Who We Serve

In 2023 ...

Data Source: UDS 2023

36,667

People received much-needed health care

313,564

Patient Visits

94%

earn under 200% FPL which is less than \$29,000 annually for 1 person 76%

Are insured by Medicaid or are dually eligible for Medicaid and Medicare

12,172

Patients were children under the age of 18

66%

Patients best served in a language other than English

14%

Uninsured

> 550

Employees









SYSTEMS²

Mental health practice serving children, adolescents, adults & elders

Serving Fairbanks Anchorage Kenai

www.ndsystems.org

Mission to serve children, adolescents, adults and elders specializing in mental health care Accepting Medicare, Medicaid, TriCare, VA, Aetna

Established 2012 in Fairbanks Alaska

Expanded to Kenai Peninsula 2016 Homer now 2021 Kenai

Expanded to Anchorage January 2024

Current Staffing: Four PMHNP's: Teresa Lyons, Nicole Sharpe, Jessica McGrath,

Sharon Geraghty

One RN: Tara Duncan

One M.Ed: Brighton Brooks

Two MSW's: Alissa Knott, Jaylene Day

Teresa Lyons CEO, Nikolas Lyons CFO,

Donna Woodkey Dinsmore RN, MBA, CIC

Justine Lyons Internal Legal Counsel/HR Director,

Yuliya Jordan Accounting Director,

Jean Drobnick Billing Coordinator



Tennessee Primary Care Association



Support from Leadership & Board of Directors

Presenting the Case for a Postgraduate NP and/or PA Training Program



Top to Bottom Support



Figure 3.1: Relationship of Stakeholders to Program Drivers and Program Mission

Flinter, M., & Bamrick, K. (2017). Training the next generation: Residency and fellowship programs for nurse practitioners in Community Health Centers. Retrieved from <a href="https://www.weitzmaninstitute.org/sites/default/files/NPResidencyBook/NPReside



Guiding Principles For Communication



Figure 3.3: Guiding Principles for Communication

Flinter, M., & Bamrick, K. (2017). Training the next generation: Residency and fellowship programs for nurse practitioners in Community Health Centers. Retrieved from https://www.weitzmaninstitute.org/sites/default/files/NPResidencyBook/NPResidencyBook.pdf



Leadership and Board of Directors

- CEO, leadership team and BOD must be fully committed to the training program and allocating the necessary resources
- What do they need to know:
 - ✓ Mission Statement & Program Drivers
 - ✓ National Landscape
 - ✓ Outcomes

- ✓ Program Structure
- ✓ Resource Assessment
- ✓ Finances
- Develop your presentation and use data to support your case!



Key Organizational Departments IT, Human Resources, Clinical, and Finance

- Understanding the role and support each department will need to provide
- Structure for communicating and completing required tasks
- Identifying leads in each department that your team can work with to implement key program components
- Developing policies and procedures that all parties agree to follow for key program tasks

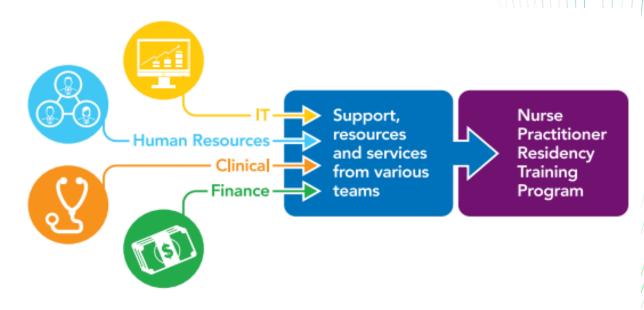


Figure 3.5: Resources for NP Postgraduate Residency Training Program

Flinter, M., & Bamrick, K. (2017). Training the next generation: Residency and fellowship programs for nurse practitioners in Community Health Centers. Retrieved from https://www.weitzmaninstitute.org/sites/default/files/NPResidencyBook/NPResidencyBook.pdf//



Communication Within Your Organization

Stakeholder Analysis and Communication Planning



Overall Organization Communication and Education

Communicate organization's plan to launch a postgraduate residency program

Why is the organization launching a PGR program?

What does the PGR program look like?

How will the PGR program intersect with your work?



Stakeholder Analysis

Stakeholder

- Has something to gain/lose through outcomes of the project
- Has a powerful bearing on outcome of the project
- Is affected by the project

Stakeholder Analysis

- Define ways to engage stakeholders to maximize positive impact
- Identify who needs to know about the project
- Develop how the project should be presented/framed
- Assess opinions/thoughts about the project



Stakeholder Grid

Interest

Measures to what degree the stakeholder is likely to be affected by the project and what degree of interest or concern they have in or about it

Power

Measures the influence they have over the project and to what degree they can help achieve or block the desired change

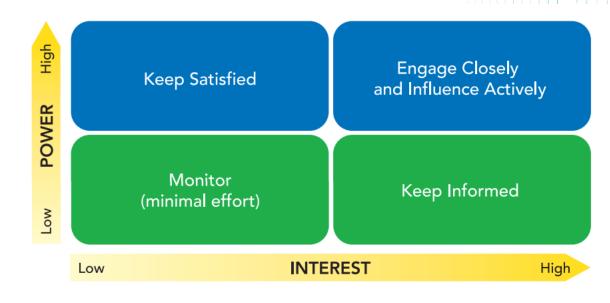


Figure 3.2: Stakeholder Analysis. Adapted from Mendelow's Stakeholder Power-Interest Matrix (1991)

Stakeholders with high power and interests aligned with the project, are the people it is important to fully engage and bring on board.



Stakeholder Communication Plan

Communication Plan								
Stakeholder	Objectives	Message(s)	Media & Methods	Timing & Frequency	Who/When/Where			

Figure 3.4: Stakeholder Communication Plan

- Who are your key stakeholders?
- What are you objectives in communicating with them about the project?
- What are they key messages you want to communicate?
- How will it be communicated?
- When and how often will you communicate?



Overview of Program Structure



Core Elements of Postgraduate NP/PA Residency Program

12 Months
Full-time Employment

Training to Clinical Complexity and High Performance Model of Care

Team-based care
Integrated care
Inter-professional collaboration

Data driven QI Expert use of technology Primary care innovations Full Integration at Organization

Clinical Based Training Experiences							
(80% of time)							

- Precepted Continuity Clinics (40%); Develop and manage a panel of patients with the exclusive and dedicated attention of an expert preceptor.
- Specialty Rotations (20%); Experience in core specialty areas most commonly encountered in primary care focused on building critical skills and knowledge for primary care practice.
- Mentored Clinics (20%); Focused on diversity of chief complaints, efficiency, and acute care working within a variety of primary care teams.

- **Didactic Education** High volume and burden topics most commonly seen in primary care.
- Project ECHO Case-based distance learning in high complexity issues like chronic pain, treating HIV, Hepatitis C, and MOUD

Education (20% of time)

Quality Improvement Training - Training to a high performance QI model, including frontline process improvement, collecting and reviewing data, and leadership development



Questions?



Assignments

- ✓ List out your key program drivers
- ✓ Draft your Mission and Vision Statement
- ✓ Complete the Resource Assessment
- ✓ Develop presentation and if possible present to leadership/board (if have not already done so)

Access the Google Drive to upload deliverables:





Next Steps

- Coach Calls
 - Tuesday October 15th 1:00pm Eastern / 10:00am Pacific
 - Tuesday October 29th 1:00pm Eastern / 10:00am Pacific
- Session 2: Tuesday November 12th 1:00pm Eastern / 10:00am Pacific
- Register for the <u>Weitzman Education Platform</u> to receive CME, resources, and more!





Wrap-Up



Developing Curriculum in Line with Accreditation Activity Session

- Presented by Charise Corsino, Program Director of CHC's Postgraduate NP Residency Program, and Kerry Bamrick, Executive Director of the <u>Consortium for</u> <u>Advanced Practice Providers</u>, this activity session will explore curriculum development in the lens of accreditation standards.
- When: Wednesday November 4th, 2024
- Time: 1:00-2:00pm Eastern / 10:00am-11:00am Pacific
- Link to register

Scan Here to Reaister:



Health Center Staff: Give your input TODAY!

Complete the 2024 National Health Center Training and Technical Assistance (T/TA)
Needs Assessment.

Tell us what training and professional development support you and your health center teammates need to best serve your community.

Help our training partners create learning opportunities designed with health center teams in mind.

This project is supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) as part of an award totaling \$6,625,000 with zero percentage financed with non-governmental sources. The contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement, by HRSA, HHS, or the U.S. Government. For more information, please visit HRSA.gov.





ALL health center staff are encouraged to complete the National T/TA needs assessment. It's available in English and Spanish!



August 19 - November 1, 2024



Click on this link

Or scan the QR code:





So you can help inform the training and professional development available to health center staff.



Explore more resources!

National Learning Library: Resources for Clinical Workforce Development

National Learning Library



CHC has curated a series of resources, including webinars to support your health center through education, assistance and training. CLINICAL WORKFORCE
DEVELOPMENT
Transforming Teams, Training the Next Generation

The National Training and Technical Assistance Cooperative Agreements (NCAs) provide free training and technical assistance that is data driven, cutting edge and focused on quality and operational improvement to support health centers and look-alikes. Community Health Center, Inc. (CHC, Inc.) and its Weitzman Institute specialize in providing education and training to interested health centers in Transforming Teams and Training the Next Generation through;

National Webinars on advancing team based care, implementing post-graduate residency training programs, and health professions student training in FOHCs.

Invited participation in Learning Collaboratives to advance team based care or implement a post-graduate residency training program at your health center.

Please keep watching this space for information on future sessions. To request technical assistance from our NCA, please email NCA@chc1.com for more information.

Learn More

https://www.weitzmaninstitute.org/ncaresources

Health Center Resource Clearinghouse



https://www.healthcenterinfo.org/



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REMINDER: Complete evaluation in the poll!

Next Learning Session is **Tuesday November 12**th!